02-01-05

EV549908510217

PTO/SB/22 (12-04)
Approved for use through 07/31/2006. OMB 0651-0031
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BETHION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)	Docket Number (Optional)				
FY 2005 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)	ER1 -006US				
Application Number 10/085,497	Filed 2/26/2002				
For Risk Management Information Interface System and Associated Meth	ods ·				
Art Unit 2177	Examiner S. Rayyan				
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.					
The requested extension and fee are as follows (check time period desired a	and enter the appropriate fee below):				
<u>Fee</u>	Small Entity Fee				
✓ One month (37 CFR 1.17(a)(1)) \$120	\$60 \$ <u>120.00</u>				
Two months (37 CFR 1.17(a)(2)) \$450	\$225				
Three months (37 CFR 1.17(a)(3)) \$1020	\$510				
Four months (37 CFR 1.17(a)(4)) \$1590	\$795 \$				
Five months (37 CFR 1.17(a)(5)) \$2160	\$1080				
Applicant claims small entity status. See 37 CFR 1.27.					
A check in the amount of the fee is enclosed.					
Payment by credit card. Form PTO-2038 is attached.					
The Director has already been authorized to charge fees in this a	application to a Deposit Account.				
The Director is hereby authorized to charge any fees which may Deposit Account Number 12-0769 . I have	be required, or credit any overpayment, to e enclosed a duplicate copy of this sheet.				
WARNING: Information on this form may become public. Credit card inform	, , , , , , , , , , , , , , , , , , ,				
Provide credit card information and authorization on PTO-2038.					
I am the applicant/inventor.					
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).					
attorney or agent of record. Registration Number					
attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34	40309				
Dani M 1/21/2005					
Signature	Date				
David M. Huntley	509-324-9256				
Typed or printed name	Telephone Number				
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.					
Total of forms are submitted.					

This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2. 10085497

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PTO/SB/17 (12-04)

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1995 no persons are required to re	espond to a collection of info	rmation unless it displays a valid OMB co-	ntrol number
2/08/2004.		Complete if Known	
propriations Act, 2005 (H.R. 4818).	Application Number	10/085,497	
ISMITTAL	Filing Date	2/26/2002	
2005	First Named Inventor	Mark A,Tschliegg	
	,	C. Davison	

ed Appropriations Act, 2005 (H.

o LEE IVAN	IOIVII I AL	Filing Date	2/26/2002	
For FY 2005		First Named Inventor	Mark A,Tschliegg	
		Examiner Name	S. Rayyan	
Applicant claims small entity status. See 37 CFR 1.27		Art Unit	2177	
TOTAL AMOUNT OF PAYMENT	(\$) 720.00	Attorney Docket No.	ER1 -006US	
METHOD OF PAYMENT (chec	k all that apply)			
Check Credit Card	Money Order Nor	ne Other (please id	lentify):	

METHOD OF PAYMENT (check all that apply)								
METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number: 12-0769 Deposit Account Name: Lee & Hayes, PLLC For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.								
FEE CALCULATION	DOLL AND	EVARABLATION	LEEES					
1. BASIC FILING, SEA	FILING		SEARCH	H FEES	S	TION FEES		,
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees Pai	<u>d (\$)</u>
Utility	300	150	500	250	200	100		
Design	200	100	100	50	130	65		
Plant	200	100	300	150	160	80		
Reissue	300	150	500	250	600	300		
Provisional	200	100	0	0	0	0		
2. EXCESS CLAIM FEES Fee Description Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent Multiple dependent claims Small Entity Fee (\$) Fee (\$) 25 200 100 180								
<u>Total Claims</u> 63 - 20 or HP =	Extra Claim 4	<u>rs Fee (\$)</u> x 50	Fee Pai	id (\$)	Multiple De Fee (\$)	<u>ependent Claims</u> Fee Paic		
HP = highest number of total Indep. Claims 5 - 3 or HP = HP = highest number of inde	claims paid for Extra Claim 2	r, if greater than 20 ss Fee (\$) x 200	<u>Fee Pai</u> = 400	<u>d (\$)</u>	<u>ree (\$)</u>		<u> </u>	
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) - 100 = /50 = (round up to a whole number) x Fees Paid (\$)								
4. OTHER FEE(S) Non-English Specif	-	130 fee (no sma	all entity dis	scouņt)		۰	120.00	

SUBMITTED BY						
Signature	Voni M. Home	Registration No. (Attorney/Agent) 40309	Telephone (509) 324-9256			
Name (Print/Type)	David M. Huntley		Date //3//2005			

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.